

# Collection- Missing Invoice Report - Excel

Last Modified on 03/13/2018 3:15 pm EDT

A report of the missing invoices from a facility.

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Center

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Create Report

## Example Report-

Center	Family ID	Family Name	Parent ID	Parent First Name	Parent Last Name	Funding Type	Term Date	Current Month Copy	Monthly Amount Deposited	Current Month's Balance	Last Payment Date	Last Payment Amount	Previous Outstanding Balance
Central Falls	98773 Baker Family		192381					0	0	0		0	0
Central Falls	174657 Test Family		340963					0	0	0		0	0
Central Falls	23535 Adams D Family		49409	Amy	Adams			0	0	0	01/17/2018	10	0
Central Falls	23535 Adams D Family		46410	David	Adams			0	0	0	01/28/2017	369	0
Central Falls	61283 Adams Family		119856	Lisa	Adams			0	0	0	05/04/2016	100	0
Central Falls	61283 Adams Family		297066					0	0	0		0	0
Central Falls	93208 Allemon Family		181712	Guardian 1	Allemon			0	0	0		0	0
Central Falls	23534 barnes Family		46407	Janey	Allman			0	0	0		0	0
Central Falls	110087 Anderson Family		212242	Mom	Anderson			0	0	0	03/13/2017	98.5	0
Central Falls	110087 Anderson Family		212243	Dad	Anderson			0	0	0	10/14/2014	30	0
Central Falls	114986 Anderson Family		224000	Amy	Anderson			0	0	0	03/12/2015	1500	0
Central Falls	114986 Anderson Family		224001	Bill	Anderson			0	0	0		0	0
Central Falls	215549 BUSD - SAIS		421099	Guardian 1	angel		11/17/2016	0	0	0		0	0
Central Falls	215549 BUSD - SAIS		421100	Guardian 2	angel		11/17/2016	0	0	0		0	0
Central Falls	115550 Anthony Family		224121	Timothy	Anthony			0	0	0	11/23/2015	100	0
Central Falls	98773 Baker Family		192380	Janet	Baker			0	0	0		0	0
Central Falls	23533 Baker Family		217069	charlene	baker			0	0	0		0	0
Central Falls	23533 Baker Family		217070	Guardian 2	baker			0	0	0		0	0
Central Falls	23534 barnes Family		46408	Tom	Barnes			0	0	0		0	0
Central Falls	315474 Benning Family		617866	Guardian 1	Benning			0	0	0		0	0
Central Falls	315474 Benning Family		617867	Guardian 2	Benning			0	0	0		0	0
Central Falls	132507 Family A		257296	Guardian 1	Billy			0	0	0		0	0
Central Falls	132507 Family A		257297	Guardian 2	Billy			0	0	0		0	0
Central Falls	130668 Boyd Family		256921	Guardian 1	Boyd			0	0	0		0	0
Central Falls	130668 Boyd Family		256922	Guardian 2	Boyd			0	0	0		0	0
Central Falls	273947 Bradley Family		534974	Maryann	Bradley			0	0	0		0	0
Central Falls	273947 Bradley Family		534975	Guardian 2	Bradley			0	0	0		0	0
Central Falls	43594 Jan Family		86608	Marsha	Brady			0	0	0		0	0
Central Falls	43594 Jan Family		86610	Greg	Brady			0	0	0		0	0
Central Falls	130665 Brady Family		254171	Jessie	Brady			0	0	0	09/26/2016	150	0

## Fields-

**Center Name:** The name of the facility within the Platform.

**Statement ID:** The identification number assigned to the billing statement.

**Family ID:** The identification number assigned to the family within the Platform.

**Family Name:** The name of the family within the Platform.

**Statement Period Number:** The assigned billing period for the billing

statement.

**Statement Period Year:** The assigned billing period year for the billing statement.

**Statement Begin Date:** The date the billing statement started.

**Statement End Date:** The date the billing statement ends.

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